

## Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2003

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

## A For the 2003 calendar year, or tax year beginning

and ending

## B Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

## C Name of organization

United Way of Metropolitan Nashville, Inc.

Number and street (or P O box if mail is not delivered to street address)

PO Box 280420, 250 Venture Circle

City or town

Nashville

State or country

TN

Room/suite

ZIP + 4

37228

## D Employer identification number

62-0533104

## E Telephone number

615-255-8501

## F Accounting method:

☐ Cash ☒ Accrual☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

## G Website: ▶ www.unitedwaynashville.org

## J Organization type (check only one)

☒ 501(c) ( 3 ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527

## K Check here

☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No

(If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization

covered by a group ruling? ☐ Yes ☐ No

## I Group Exemption Number ▶

M Check ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

## L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶

27,326,282

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

1 Contributions, gifts, grants, and similar amounts received:					
a	Direct public support	STMT 1	1a	21,789,350	
b	Indirect public support	STMT 1	1b	881,957	
c	Government contributions (grants)	STMT 1	1c	3,719,714	
d	Total (add lines 1a through 1c) (cash \$ 26,391,021 noncash \$ )		1d	26,391,021	
2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	532,383	
3	Membership dues and assessments		3	0	
4	Interest on savings and temporary cash investments		4	34,006	
5	Dividends and interest from securities		5	137,688	
6a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)		6c	0	
7	Other investment income (describe )		7	0	
8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
b	Less: cost or other basis and sales expenses	0	8a	0	
c	Gain or (loss) (attach schedule)	0	8b	0	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	30,029	8c	0	
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		8d	30,029	
a	Gross revenue (not including \$ 21,789,350 of contributions reported on line 1a)	9a	0		
b	Less: direct expenses other than fundraising expenses	9b	0		
c	Net income or (loss) from special events (subtract line 9b from line 9a)		9c	0	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c	0	
11	Other revenue (from Part VII, line 103)		11	201,155	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	27,326,282	
13	Program services (from line 44, column (B))		13	23,394,912	
14	Management and general (from line 44, column (C))		14	1,119,170	
15	Fundraising (from line 44, column (D))		15	2,446,540	
16	Payments to affiliates (attach schedule)		16	175,728	
17	Total expenses (add lines 16 and 44, column (A))		17	27,136,350	
18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	189,932	
19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	18,152,306	
20	Other changes in net assets or fund balances (attach explanation)	STMT 3	20	2,399,147	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	20,741,385	

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2003)

(HTA)

SCANNED SEP 08 2004

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) STMT 4 (cash \$ 21,898,055 noncash \$ 0)	22	21,898,055	21,898,055	
23	Specific assistance to individuals (attach schedule)	23	0		
24	Benefits paid to or for members (attach schedule)	24	0		
25	Compensation of officers, directors, etc.	25	178,600	71,440	53,580
26	Other salaries and wages	26	2,554,393	790,439	570,503
27	Pension plan contributions	27	123,936	38,647	34,694
28	Other employee benefits	28	213,369	68,805	36,261
29	Payroll taxes	29	182,944	61,608	35,087
30	Professional fundraising fees	30	0		
31	Accounting fees	31	64,600	5,000	53,350
32	Legal fees	32	26,681		26,681
33	Supplies	33	26,992	8,800	12,735
34	Telephone	34	59,690	15,136	17,953
35	Postage and shipping	35	44,695	11,490	12,707
36	Occupancy	36	156,454	38,710	53,124
37	Equipment rental and maintenance	37	147,063	28,983	72,371
38	Printing and publications	38	514,392	4,040	2,363
39	Travel	39	50,015	13,998	11,323
40	Conferences, conventions, and meetings	40	81,467	7,193	4,343
41	Interest	41	0		
42	Depreciation, depletion, etc. (attach schedule) STMT 8	42	177,899	50,088	48,361
43	Other expenses not covered above (itemize) a Miscellaneous	43a	29,275	475	26,725
	b Non-fundraising professional fees	43b	374,095	274,004	10,637
	c Dues and subscriptions	43c	31,039	8,001	11,404
	d Planned giving premium expense	43d	24,968		24,968
	e	43e	0		
	f	43f	0		
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	26,960,622	23,394,912	1,119,170

2,446,540

**Joint Costs.** Check ☒ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

Yes ☐ No ☒

If "Yes," enter (i) the aggregate amount of these joint costs \$ 0, (ii) the amount allocated to Program services \$ ,

(iii) the amount allocated to Management and general \$ , and (iv) the amount allocated to Fundraising \$

**Part III Statement of Program Service Accomplishments** (See page 25 of the instructions.)

What is the organization's primary exempt purpose? STMT 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses  
Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.

a	Activities funded by the annual campaign for outcome-based investments in agency programs and program investments in the Read to Succeed initiative. Also includes \$9,222,406 of net designations made by donors passed through to agencies. (See Part IV-B and STMT 6)	(Grants and allocations \$ 18,199,755)	18,199,755
b	Community Building activities funded by the annual campaign related to planning, oversight, and administration of outcome-based investments, Read to Succeed, 2-1-1, and support for the Family Resource Center system.	(Grants and allocations \$ )	1,084,581
c	Activities that deliver services funded by sources other than the annual campaign, such as the Ryan White/Community AIDS Partnership, Workforce Development, and Family Resource Center coordination.	(Grants and allocations \$ 3,698,300)	4,110,576
d		(Grants and allocations \$ )	
e	Other program services (attach schedule)	(Grants and allocations \$ )	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		23,394,912

**Part IV Balance Sheets** (See page 25 of the instructions.)

<b>Note:</b> Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.				(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>45</b>	Cash—non-interest-bearing . . . . .		721,708	<b>45</b>	1,098,251
	<b>46</b>	Savings and temporary cash investments . . . . .		5,271,235	<b>46</b>	4,273,089
	<b>47 a</b>	Accounts receivable . . . . .	<b>47a</b> 0			
	<b>b</b>	Less: allowance for doubtful accounts . . . . .	<b>47b</b> 0	0	<b>47c</b>	0
	<b>48 a</b>	Pledges receivable . . . . .	<b>48a</b> 19,909,017			
	<b>b</b>	Less: allowance for doubtful accounts . . . . .	<b>48b</b> 3,794,943	19,017,200	<b>48c</b>	16,114,074
	<b>49</b>	Grants receivable . . . . .		170,367	<b>49</b>	574,307
	<b>50</b>	Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		0	<b>50</b>	0
	<b>51 a</b>	Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b> 0			
	<b>b</b>	Less: allowance for doubtful accounts . . . . .	<b>51b</b> 0	0	<b>51c</b>	0
	<b>52</b>	Inventories for sale or use . . . . .			<b>52</b>	
	<b>53</b>	Prepaid expenses and deferred charges . . . . .		703,275	<b>53</b>	649,659
	<b>54</b>	Investments—securities (attach schedule) STMT 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		5,799,184	<b>54</b>	10,197,036
	<b>55 a</b>	Investments—land, buildings, and equipment: basis . . . . .	<b>55a</b> 0			
	<b>b</b>	Less: accumulated depreciation (attach schedule) . . . . .	<b>55b</b> 0	0	<b>55c</b>	0
<b>56</b>	Investments—other (attach schedule) . . . . .		0	<b>56</b>	0	
<b>57 a</b>	Land, buildings, and equipment: basis . . . . .	<b>57a</b> 3,176,793				
<b>b</b>	Less: accumulated depreciation (attach schedule) . . . . . STMT 8	<b>57b</b> 2,372,440	867,969	<b>57c</b>	804,353	
<b>58</b>	Other assets (describe <input type="checkbox"/> Insurance CSV and other assets )		900,512	<b>58</b>	988,547	
<b>59</b>	<b>Total assets</b> (add lines 45 through 58) (must equal line 74) . . . . .		33,451,450	<b>59</b>	34,699,316	
<b>Liabilities</b>	<b>60</b>	Accounts payable and accrued expenses . . . . .		350,961	<b>60</b>	344,624
	<b>61</b>	Grants payable . . . . .		14,948,183	<b>61</b>	13,613,307
	<b>62</b>	Deferred revenue . . . . .		0	<b>62</b>	
	<b>63</b>	Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		0	<b>63</b>	0
	<b>64 a</b>	Tax-exempt bond liabilities (attach schedule) . . . . .		0	<b>64a</b>	0
	<b>b</b>	Mortgages and other notes payable (attach schedule) . . . . .		0	<b>64b</b>	0
	<b>65</b>	Other liabilities (describe <input type="checkbox"/> )		0	<b>65</b>	0
<b>66</b>	<b>Total liabilities</b> (add lines 60 through 65) . . . . .		15,299,144	<b>66</b>	13,957,931	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>					
	<b>67</b>	Unrestricted . . . . .		66,498	<b>67</b>	1,793,247
	<b>68</b>	Temporarily restricted . . . . .		13,978,401	<b>68</b>	11,825,404
	<b>69</b>	Permanently restricted . . . . .		4,107,407	<b>69</b>	7,122,734
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>					
	<b>70</b>	Capital stock, trust principal, or current funds . . . . .			<b>70</b>	
	<b>71</b>	Paid-in or capital surplus, or land, building, and equipment fund . . . . .			<b>71</b>	
	<b>72</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>72</b>	
	<b>73</b>	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) . . . . .		18,152,306	<b>73</b>	20,741,385
	<b>74</b>	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73) . . . . .		33,451,450	<b>74</b>	34,699,316

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See page 27 of the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements STMT 9	<b>a</b>	19,657,684
<b>b</b>	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments \$ 1,553,808		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify): \$		
	Add amounts on lines (1) through (4)	<b>b</b>	1,553,808
<b>c</b>	Line a minus line b	<b>c</b>	18,103,876
<b>d</b>	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	Net designated contrib - STMT \$ 9,222,406		
	Add amounts on lines (1) and (2)	<b>d</b>	9,222,406
<b>e</b>	Total revenue per line 12, Form 990 (line c plus line d)	<b>e</b>	27,326,282

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements STMT 9	<b>a</b>	17,913,944
<b>b</b>	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify): \$		
	Add amounts on lines (1) through (4)	<b>b</b>	0
<b>c</b>	Line a minus line b	<b>c</b>	17,913,944
<b>d</b>	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	Net designated to agencies \$ 9,222,406		
	Add amounts on lines (1) and (2)	<b>d</b>	9,222,406
<b>e</b>	Total expenses per line 17, Form 990 (line c plus line d)	<b>e</b>	27,136,350

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated; see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name <u>Mark H. Desmond</u> Str <u>250 Venture Circle</u> City <u>Nashville</u> ST <u>TN</u> ZIP <u>37228</u>	Title <u>President/CEO</u> Hr/WK <u>40</u>	164,200	26,755	6,000
Name <u>Board of Trustees</u> Str _____ City <u>STMT 10</u> ST _____ ZIP _____	Title <u>STMT 10</u> Hr/WK _____	0	0	0
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			
Name _____ Str _____ City _____ ST _____ ZIP _____	Title _____ Hr/WK _____			

**75** Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule—see page 28 of the instructions.

Yes ☐ No ☒

**Part VI Other Information** (See page 28 of the instructions.)

Yes No

<b>76</b>	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	<b>76</b>		X
<b>77</b>	Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . If "Yes," attach a conformed copy of the changes.	<b>77</b>		X
<b>78 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . .	<b>78a</b>		X
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . . Filed to record NOL carryover only	<b>78b</b>	N/A	
<b>79</b>	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a state STMT 11	<b>79</b>	X	
<b>80 a</b>	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . . . .	<b>80a</b>		X
<b>b</b>	If "Yes," enter the name of the organization ▶ _____ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.			
<b>81 a</b>	Enter direct and indirect political expenditures See line 81 instructions . . . . . <b>81a</b>			
<b>b</b>	Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>81b</b>		X
<b>82 a</b>	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? . . . . .	<b>82a</b>	X	
<b>b</b>	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) . . . . . <b>82b</b>		0	
<b>83 a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications? . . . . .	<b>83a</b>	X	
<b>b</b>	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . . . .	<b>83b</b>	X	
<b>84 a</b>	Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	<b>84a</b>		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>84b</b>	N/A	
<b>85</b>	<b>501(c)(4), (5), or (6) organizations.</b> <b>a</b> Were substantially all dues nondeductible by members? . . . . .	<b>85a</b>		
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . . If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	<b>85b</b>		
<b>c</b>	Dues, assessments, and similar amounts from members . . . . . <b>85c</b>			
<b>d</b>	Section 162(e) lobbying and political expenditures . . . . . <b>85d</b>			
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . . <b>85e</b>			
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . . <b>85f</b>		0	
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	<b>85g</b>		
<b>h</b>	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? . . . . .	<b>85h</b>		
<b>86</b>	<b>501(c)(7) orgs.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12 . . . . . <b>86a</b>			
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities . . . . . <b>86b</b>			
<b>87</b>	<b>501(c)(12) orgs.</b> Enter: <b>a</b> Gross income from members or shareholders . . . . . <b>87a</b>			
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . . <b>87b</b>			
<b>88</b>	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX . . . . .	<b>88</b>		X
<b>89 a</b>	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ _____; section 4912 ▶ _____; section 4955 ▶ _____			
<b>b</b>	<b>501(c)(3) and 501(c)(4) orgs.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction . . . . .	<b>89b</b>		X
<b>c</b>	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____			
<b>d</b>	Enter: Amount of tax on line 89c, above, reimbursed by the organization . . . . . ▶ _____			
<b>90 a</b>	List the states with which a copy of this return is filed ▶ Tennessee			
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) <b>90b</b>		58	
<b>91</b>	The books are in care of ▶ Name Mike Green, Sr. Vice President - Finance & Admin Telephone no ▶ (615) 255-8501 Located at ▶ 250 Venture Circle City Nashville ST TN Zip + 4 ▶ 37228			
<b>92</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>92</b> N/A			

**Part VII Analysis of Income-Producing Activities** (See page 33 of the instructions.)**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E)
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
<b>93</b> Program service revenue.					
<b>a</b> Service fees (designation)					423,271
<b>b</b> Campaign/finance management fees					109,112
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments			14	34,006	
<b>96</b> Dividends and interest from securities			14	137,688	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property					
<b>b</b> not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	30,029	
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue: <b>a</b> Miscellaneous					201,155
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))		0		201,723	733,538
<b>105</b> Total (add line 104, columns (B), (D), and (E))					935,261

**Note:** Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions.)

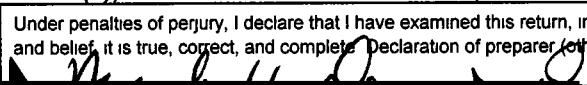
Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
<b>93a</b>	Used for the enhancement of the annual campaign and to provide the mechanism for designated contributions to agencies.
<b>93b</b>	Used to provide management and financial services for the Combined Federal Campaign
<b>103a</b>	To record growth in the Planned Giving program and for the enhancement of the annual campaign.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%		0	0
	%		0	0
	%		0	0
	%		0	0

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please  Date 8/13/04

President & CEO

**SCHEDULE A**  
**(Form 990 or 990-EZ)****Organization Exempt Under Section 501(c)(3)**(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust  
**Supplementary Information—(See separate instructions.)**

OMB No 1545-0047

**2003**Department of the Treasury  
Internal Revenue Service**MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

United Way of Metropolitan Nashville, Inc.

Employer identification number

62-0533104

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Name John W. Havron Str 250 Venture Circle City Nashville ST TN Zip 37228 Country	Title Exec Vice Pres Avg hr/wk 40	104,622	16,945	0
Name John M. Green Str 250 Venture Circle City Nashville ST TN Zip 37228 Country	Title Sr Vice Pres Avg hr/wk 40	84,484	19,891	0
Name Philip N. Orr Str 250 Venture Circle City Nashville ST TN Zip 37228 Country	Title Sr Vice Pres Avg hr/wk 40	80,884	21,424	0
Name Karen A. Snyder Str 250 Venture Circle City Nashville ST TN Zip 37228 Country	Title Vice President Avg hr/wk 40	75,880	11,267	0
Name Angela M. Murray Str 250 Venture Circle City Nashville ST TN Zip 37228 Country	Title Controller Avg hr/wk 40	63,754	9,308	0
Total number of other employees paid over \$50,000	7			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Name Jayne Zeharias, (Heros, Inc.) Check here if a business <input checked="" type="checkbox"/> Str PO Box 1271 City Lebanon ST TN ZIP 37088 Country	Evaluation and consulting	178,638
Name Sam Macmaster, (Bride, Jones & Macmasi) Check here if a business <input checked="" type="checkbox"/> Str PO Box 100643 City Nashville ST TN ZIP 37224 Country	Ryan White - evaluation & consulting	137,875
Name Phil Martin, (Mercatus Communications) Check here if a business <input checked="" type="checkbox"/> Str 500 Interstate Blvd, Suite 320 City Nashville ST TN ZIP 37210 Country	Media consulting	51,500
Name _____ Check here if a business <input type="checkbox"/> Str _____ City _____ ST _____ ZIP _____ Country _____		
Name _____ Check here if a business <input type="checkbox"/> Str _____ City _____ ST _____ ZIP _____ Country _____		
Total number of others receiving over \$50,000 for professional services	0	

**Part III** Statements About Activities (See page 2 of the instructions.)

Yes No

- 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ 0 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) . . . . .

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a Sale, exchange, or leasing of property? . . . . . 2a X  
 b Lending of money or other extension of credit? . . . . . 2b X  
 c Furnishing of goods, services, or facilities? . . . . . 2c X  
 d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . . See Part V, Form 990 2d X

- e Transfer of any part of its income or assets? . . . . . 2e X

- 3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) . . . . . 3a X

- b Do you have a section 403(b) annuity plan for your employees? . . . . . 3b X

- 4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? . . . . . 4 X

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  
 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)  
 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  
 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  
 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► City ST Country  
 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)  
 11 a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)  
 11 b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)  
 12 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)  
 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)



**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	27,198,397	24,643,139	23,036,501	14,043,417	88,921,454
<b>16</b> Membership fees received					0
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					0
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	262,365	187,288	427,441	500,445	1,377,539
<b>19</b> Net income from unrelated business activities not included in line 18					0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
<b>23</b> Total of lines 15 through 22	27,460,762	24,830,427	23,463,942	14,543,862	90,298,993
<b>24</b> Line 23 minus line 17	27,460,762	24,830,427	23,463,942	14,543,862	90,298,993
<b>25</b> Enter 1% of line 23	274,608	248,304	234,639	145,439	
<b>26 Organizations described on lines 10 or 11:</b>					
a Enter 2% of amount in column (e), line 24					<b>26a</b> 1,805,980
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					<b>26b</b> 6,606,832
c Total support for section 509(a)(1) test: Enter line 24, column (e)					<b>26c</b> 90,298,993
d Add: Amounts from column (e) for lines:					
18 1,377,539 19 0					
22 0 26b 6,606,832					<b>26d</b> 7,984,371
e Public support (line 26c minus line 26d total)					<b>26e</b> 82,314,622
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 91.16%
<b>27 Organizations described on line 12:</b>					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:					
(2002) (2001) (2000) (1999)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:					
(2002) (2001) (2000) (1999)					
c Add: Amounts from column (e) for lines:					
15 0 16 0					
17 0 20 0 21 0					<b>27c</b> 0
d Add: Line 27a total and line 27b total					<b>27d</b> 0
e Public support (line 27c total minus line 27d total)					<b>27e</b> 0
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					<b>27f</b> 0
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> 0.00%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> 0.00%
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V Private School Questionnaire** (See page 7 of the instructions.)  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----	<b>31</b>	
<b>32</b> Does the organization maintain the following:		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .	<b>32d</b>	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.) ----- -----		
<b>33</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? . . . . .	<b>33a</b>	
<b>b</b> Admissions policies? . . . . .	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff? . . . . .	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance? . . . . .	<b>33d</b>	
<b>e</b> Educational policies? . . . . .	<b>33e</b>	
<b>f</b> Use of facilities? . . . . .	<b>33f</b>	
<b>g</b> Athletic programs? . . . . .	<b>33g</b>	
<b>h</b> Other extracurricular activities? . . . . .	<b>33h</b>	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
<b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either 34a or b, please explain using an attached statement.	<b>34b</b>	
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation . . . . .	<b>35</b>	

**Part VI-A****Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)Check ☐ **a** if the organization belongs to an affiliated groupCheck ☐ **b** if you checked "a" and "limited control" provisions apply**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	0
<b>39</b>	Other exempt purpose expenditures . . . . .	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>	0
<b>41</b>	Lobbying nontaxable amount. Enter the amount from the following table— <div style="display: flex; justify-content: space-between;"> <div> <p><b>If the amount on line 40 is—</b></p> <p>Not over \$500,000 . . . . .</p> <p>Over \$500,000 but not over \$1,000,000 . . . . .</p> <p>Over \$1,000,000 but not over \$1,500,000 . . . . .</p> <p>Over \$1,500,000 but not over \$17,000,000 . . . . .</p> <p>Over \$17,000,000 . . . . .</p> </div> <div> <p><b>The lobbying nontaxable amount is—</b></p> <p>20% of the amount on line 40</p> <p>\$100,000 plus 15% of the excess over \$500,000</p> <p>\$175,000 plus 10% of the excess over \$1,000,000</p> <p>\$225,000 plus 5% of the excess over \$1,500,000</p> <p>\$1,000,000</p> </div> </div>	<b>41</b>	0
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41) . . . . .	<b>42</b>	0
<b>43</b>	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 . . . . .	<b>43</b>	0
<b>44</b>	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . . . .	<b>44</b>	0

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .					0
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					0
<b>47</b> Total lobbying expenditures . . . . .					0
<b>48</b> Grassroots nontaxable amount . . . . .					0
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					0
<b>50</b> Grassroots lobbying expenditures . . . . .					0

**Part VI-B****Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
<b>a</b> Volunteers . . . . .			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.) . . . . .			
<b>c</b> Media advertisements . . . . .			
<b>d</b> Mailings to members, legislators, or the public . . . . .			
<b>e</b> Publications, or published or broadcast statements . . . . .			
<b>f</b> Grants to other organizations for lobbying purposes . . . . .			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .			
<b>i</b> Total lobbying expenditures (Add lines c through h.) . . . . .			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.



**Statement 2**

**Form 990, Part I, Line 16: Payment to affiliates**

Payment of dues to United Way of America, Alexandria, VA	<u>\$ 175,728</u>
--	-------------------

United Way of America is the national organization dedicated to leading the United Way movement in making measurable impact in every community across America. The United Way movement consists of approximately 1,400 community-based United Way organizations. Each is independent, separately incorporated, and governed by local volunteers.

**Statement 3**

**Form 990, Part I, Line 20: Other changes in net assets**

Other changes in net assets consists of the following:

Unrestricted net assets

Unrealized appreciation on investments	\$ 1,553,808
Net Asset distribution to separately incorporated entity	(16,991)

Temporarily restricted net assets

Change in temporarily restricted net assets	
Net campaign revenues to be reported in subsequent years	\$ 10,862,500
Net campaign results from prior years reported as unrestricted contributions in the current year and included on line 1a	<u>(13,015,497)</u>
Change in temporarily restricted net assets	(2,152,997)

Permanently restricted net assets

Permanently restricted contribution to the endowment	<u>3,015,327</u>
--	------------------

<b>Line 20 - Total other changes in net assets</b>	<b><u>\$ 2,399,147</u></b>
--	----------------------------

**United Way of Metropolitan Nashville, Inc.**  
**62-0533104**  
**2003 Form 990**

**Statements**

**Statement 4**

**Form 990, Part II, Line 22 - Schedule of Allocations and Designations**

<b><u>Agency</u></b>	<b><u>Allocation</u></b>	<b><u>Net designation</u></b>	<b><u>Total</u></b>
<b>Campaign Funded</b>			
Academy for Educational Development	69,418	271	69,689
Alcohol and Drug Council	368,971	14,619	383,590
Alive Hospice	35,789	171,720	207,509
All The Way Home, Inc.	0	345	345
Alzheimer's Association	4,304	27,571	31,875
American Red Cross	187,818	62,320	250,138
ARC of Davidson County	5,240	6,261	11,501
Bethlehem Center	284,811	51,720	336,531
Big Brothers & Big Sisters of Middle TN	48,663	25,018	73,681
Blakemore UMC Children's Center	0	15,207	15,207
Boy Scouts of America	48,957	85,260	134,217
Boys and Girls Club	139,928	79,399	219,327
CASA	53,913	17,773	71,686
Catholic Charities of Tennessee	99,034	82,379	181,413
Center for Nonprofit Management	81,480	8,360	89,840
Centerstone Mental Health Centers @ Dede Wallac	16,196	53,889	70,085
Centerstone Mental Health Centers @ Luton	26,600	0	26,600
Community Resource Center	48,720	1,402	50,122
Crisis Intervention Center	278,742	15,206	293,948
Cumberland Community Options	18,390	3,418	21,808
Dismas House/Nashville	20,084	7,070	27,154
Domestic Violence Intervention Center	9,663	19,180	28,843
Easter Seal Society of TN	81,901	18,652	100,553
Edgehill Center	0	7,873	7,873
Exchange Club Family Center	77,791	10,653	88,444
Family and Children's Services	577,512	56,915	634,427
Fashioned in His Image, Inc.	38,767	3,105	41,872
First Steps, Inc.	102,315	7,768	110,083
Girl Scout Co. of the Cumberland Valley	227,309	49,374	276,683
Goodwill Industries	113,848	7,154	121,002
Grace M. Eaton Child Care & PRC	112,429	17,265	129,694
Guardianship & Trust Corporation	67,471	5,290	72,761
Hands On Nashville	25,200	6,241	31,441
Heros, Inc.	76,000	224	76,224
High Hopes, Inc.	0	10,088	10,088
Holly Street Day Care	36,054	4,382	40,436
Interfaith Dental Clinic	108,447	6,562	115,009
Jason Foundation	12,967	15,079	28,046
King's Daughter Day Home	56,522	11,545	68,067
Ladies of Charity Welfare Agency	68,180	13,273	81,453
League for the Deaf and Hard of Hearing	90,580	18,422	109,002

**United Way of Metropolitan Nashville, Inc.**  
**62-0533104**  
**2003 Form 990**

**Statements**

**Statement 4**

**Form 990, Part II, Line 22 - Schedule of Allocations and Designations**

<u>Agency</u>	<u>Allocation</u>	<u>Net designation</u>	<u>Total</u>
Legal Aid Society of Middle TN	121,943	24,599	146,542
Magdalene	15,637	36,614	52,251
Martha O'Bryan Center	306,148	70,438	376,586
Matthew 25	45,883	9,282	55,165
Matthew Walker Comprehensive Health Center	25,000	7,049	32,049
McNeilly Center for Children	358,469	16,090	374,559
Mental Health Association	57,952	14,188	72,140
Mental Health Cooperative	57,183	3,095	60,278
Metro Nashville Public Education Foundation	47,500	3,081	50,581
Middle TN Poison Center	36,536	1,728	38,264
Mid-TN Supported Living, Inc.	26,554	2,229	28,783
Nashville Adult Literacy Council	26,276	4,206	30,482
Nashville CARES	150,628	69,701	220,329
Nashville Drug Court Support	56,347	3,297	59,644
Nashville Family Shelter	17,466	17,645	35,111
NashvilleRead	69,336	9,932	79,268
Nashville's Table	63,600	21,347	84,947
Neighborhoods Resource Center	176,962	1,271	178,233
Oasis Center	449,349	46,651	496,000
Old Hickory Christian Comm. Outreach	10,503	7,050	17,553
Operation Stand Down	24,520	10,316	34,836
Organized Neighbors of Edgehill (ONE)	5,913	721	6,634
Outlook Nashville	28,899	37,100	65,999
Parents Reaching Out	15,260	6,006	21,266
Park Center	45,007	8,319	53,326
Pencil Foundation	69,442	11,367	80,809
Planned Parenthood	11,786	60,083	71,869
Project Reflect	40,560	67,280	107,840
Rape and Sexual Abuse Center	146,243	51,571	197,814
ReDiscover East!	0	233	233
Renewal House	24,958	10,787	35,745
Residential Resource, Inc.	29,451	578	30,029
Riverwood Neighborhood Alliance, Inc.	0	221	221
Rochelle Center	245,412	16,569	261,981
Safe Haven Family Shelter	40,167	20,260	60,427
Saint Luke's Community Center	124,155	103,803	227,958
Saint Mary Villa	115,175	10,929	126,104
Salvation Army	149,858	90,164	240,022
Samaritan Recovery Community	191,234	3,755	194,989
Second Harvest Food Bank	76,304	96,471	172,775
Senior Citizens, Inc.	390,221	66,203	456,424
Special Transportation Services	0	289	289

**United Way of Metropolitan Nashville, Inc.**  
**62-0533104**  
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**Statement 4**

**Form 990, Part II, Line 22 - Schedule of Allocations and Designations**

<u>Agency</u>	<u>Allocation</u>	<u>Net designation</u>	<u>Total</u>
Tennessee Justice Center	52,297	2,928	55,225
United Cerebral Palsy of Middle Tn	31,316	10,266	41,582
United Neighborhood Health Services	101,006	133	101,139
Vanderbilt Center for Health Services	62,633	2,126	64,759
Vanderbilt Child Development Center	100,604	7,321	107,925
Vanderbilt Imagine	25,000	0	25,000
Vanderbilt University School of Nursing	9,394	10,780	20,174
Vanderbilt's Susan Gray School for Children	30,724	12,968	43,692
Woodbine Community Organization	104,684	7,910	112,594
YMCA	35,309	236,362	271,671
YWCA	291,682	39,212	330,894
Family Resource Center commitments	41,500		41,500
Read to Succeed initiative	452,349		452,349
2-1-1 database	25,000		25,000
Designations to other agencies/UW's		6,017,583	6,017,583
Other Combined Federal Campaign	-	814,045	814,045
<b>Total Campaign Funded</b>	<b>8,977,349</b>	<b>9,222,406</b>	<b>18,199,755</b>
<b>Grant Funded</b>			
Decatur Project	77,802		77,802
Family Resource Centers	359,000		359,000
Returned literacy grants	(4,727)		(4,727)
Ryan White/Comm AIDS Partnership	3,025,712		3,025,712
Workforce Development	240,513	-	240,513
<b>Total Grant Funded</b>	<b>3,698,300</b>	<b>-</b>	<b>3,698,300</b>
<b>Part II, Line 22 - Total grants and allocations</b>	<b>\$ 12,675,649</b>	<b>\$ 9,222,406</b>	<b>\$ 21,898,055</b>
Uncollected designated pledges		556,512	
Service Fees supporting United Way operations		423,271	
<b>Gross designations</b>		<b>\$ 10,202,189</b>	



**Statement 5**  
**Form 990, Part III: Primary exempt purpose**

**Mission:**

United Way seeks to bring people and organizations together to create a community where individuals, families, and neighborhoods thrive.

United Way of Metropolitan Nashville is changing people's lives in our community. *United Way identifies community needs and solutions:* We have community leaders and experts at the table to determine the most pressing needs and then identify innovative and proven methods to solving issues people care about. *United Way invests dollars thoughtfully:* United Way invests in specific outcomes that are achieved through local programs in partnership with government, business and community leaders. We invest in progress for individuals, families, and neighborhoods. *We hold ourselves accountable to the donor and the community:* United Way is committed to reporting the impact of a donor's investment and being trusted stewards of those dollars. United Way is a dynamic way to invest dollars in the community for broad impact or on issues important to the donor.

**Statement 6**  
**Form 990, Part IIIa: Exempt purpose achievements**

Net program investments from unrestricted campaign funds		\$	8,977,349
Gross agency designations from the campaign	\$	10,202,189	
Less uncollected designated pledges		(556,512)	
Less service fees supporting United Way operations		(423,271)	
Net agency designations			9,222,406
<b>Part IIIa - Exempt purpose achievements</b>		<b>\$</b>	<b><u>18,199,755</u></b>

**Statement 7**  
**Form 990, Part IV, Line 54: Schedule of investments - securities**

Investments at market value

Short term investments	\$	287,146	
US Treasury securities		563,767	
Corporate debt securities		538,874	
Equity securities		7,468,266	
US Government agency obligations		<u>1,338,983</u>	
<b>Part IV, Line 54 - Investments (securities)</b>	<b>\$</b>		<b><u>10,197,036</u></b>

United Way of Metropolitan Nashville, Inc.  
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Statement 8  
Form 990, Part II, Line 42, and Part IV, Line 57b:  
Depreciation and Accumulated Depreciation

<u>Description</u>	<u>Basis</u>	<u>2003 Expense</u>	<u>Accumulated Depreciation</u>
<b>Fixed Assets</b>			
Building	968,692	32,289	(789,885)
Building improvements	401,277	24,136	(279,422)
Computer systems	240,829	33,243	(194,424)
Software	422,253	45,337	(304,720)
Building equipment and office furniture	358,728	19,840	(312,946)
Personal Computers and Peripherals	<u>512,299</u>	<u>23,054</u>	<u>(491,043)</u>
Totals	2,904,078	177,899	(2,372,440)
<b><u>Total Fixed Assets</u></b>			
		<b>Depreciation Expense</b>	<b>Accumulated Depreciation</b>
<b>Total Depreciable Assets</b>	<b>2,904,078</b>	<b>177,899</b>	<b>(2,372,440)</b>
		<b>= = = = =</b>	<b>= = = = =</b>
<b>Land</b>	<b><u>272,715</u></b>		
<b>Gross Fixed Assets</b>	<b>3,176,793</b>	<b>Net Fixed Assets</b>	<b>804,353</b>
<b>= = = = =</b>	<b>= = = = =</b>	<b>= = = = =</b>	<b>= = = = =</b>

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**Statement 9**  
**Form 990, Part IV-A and IV-B, Line a**

Total revenue, gains, and other support consists of the following:

Consolidated Statement of Activities - Unrestricted Net Assets

Total support and revenue	\$ 18,275,159
Endowment gains (losses) exclusive of the spending rate	<u>1,382,525</u>
<b>Part IV-A, Line a - Total revenue, gains, and other support per audited financial statements</b>	<b><u>\$ 19,657,684</u></b>

Total expenses and losses consist of:

Consolidated Statement of Activities - Unrestricted Net Assets

Total costs and expenses	<u>\$ 17,913,944</u>
<b>Part IV-B, Line a - Total expenses and losses per audited financial statements</b>	<b><u>\$ 17,913,944</u></b>

Changes in Temporarily Restricted Net Assets and Permanently Restricted Net Assets  
are reported Part 1, Line 20 - Other Changes in net assets

**Statement 10**  
**Board of Trustees**

**Beth Alexander, 2006\***

Editor  
Nfocus  
104 Vaughn Road  
Nashville, TN 37221

**Stephanie B. C. Bailey, M.D., 2005\*\***

Director  
Metropolitan Health Department of the  
Metropolitan Government and Davidson County  
311 23<sup>rd</sup> Avenue North  
Nashville, Tennessee 37203

**Anne M. Blaufuss**

**Sennet Society Chair\*\*\***

**Non-voting Ex Officio**

Senior Manager  
KPMG  
1900 Nashville City Center  
511 Union Street  
Nashville, TN 37219-1735

**Richard Bracken, 2006\***

**Campaign Chair**

President & Chief Operating Officer  
HCA  
One Park Plaza, 1-4W  
Nashville, TN 37203

**David E. Briggs, 2005\***

Senior Vice President – Commercial Executive  
Bank of America  
414 Union Street, 2<sup>nd</sup> Floor  
Nashville, Tennessee 37239

**Melissa Buffington, 2004\***

Chief Administrative Officer  
Dollar General Corporation  
100 Mission Ridge  
Goodlettsville, Tennessee 37072

**Judy B. Cline, 2005\***

**Human Resources Committee Chair**

Senior Vice President, General Manager  
Lee Hecht Harrison, LLC  
One Brentwood Commons  
750 Old Hickory Blvd., Suite 115  
Brentwood, Tennessee 37027

**Colleen Conway-Welch, 2005\*\***

Professor & Dean  
Vanderbilt School of Nursing  
461 21st Avenue South  
Godchaux Hall #111  
Nashville, Tennessee 37240

**Ron Corbin, 2006\***

Field Vice President  
Allstate Insurance Company  
555 Marriott Drive  
Nashville, TN 37214

**Ralph Davis, 2006\*\***

**Treasurer/Finance Committee Chair**

Member  
Waller Lansden Dortch & Davis, PLLC  
511 Union Street, Suite 2100  
Nashville, Tennessee 37219

**Dennis Delaney, 2004\*\***

Vice President, Human Resources  
Ingram Industries Inc.  
4400 Harding Road  
Nashville, Tennessee 37205

**Mark H. Desmond**

**Voting Ex Officio**

President and Chief Executive Officer  
United Way of Middle Tennessee  
250 Venture Circle  
Nashville, Tennessee 37228

**Statement 10**  
**Board of Trustees**

**Jeff Diamond, 2006\*\***  
**Executive Committee Member at-large**  
President and COO  
Tennessee Titans  
Baptist Sports Park  
460 Great Circle Road  
Nashville, Tennessee 37228

**Dart Gore, 2004\*\***  
Executive Assistant to the Commissioner  
Tennessee Department of Labor and Workforce  
Development  
Andrew Johnson Tower, 8th Floor  
710 James Robertson Parkway  
Nashville, TN 37243

**Robert C. (Bob) Fisher, 2004\***  
President  
Belmont University  
1900 Belmont Boulevard  
Nashville, Tennessee 37212

**Francis S. Guess, 2005\***  
**Executive Committee Member at-large**  
Executive Vice President  
The Danner Company  
2 International Drive, Suite 510  
Nashville, Tennessee 37217

**Richard Q. (Rich) Ford**  
**Non-voting Emeritus Trustee**  
The Sage Group  
229 Ward Circle, Suite A22  
Brentwood, TN 37027

**E. Anthony (Tony) Heard, 2006\***  
Regional Chairman  
U.S. Bank  
150 Fourth Avenue North  
Nashville, TN 37219

**Sam O. Franklin, 2005\*\***  
Chairman  
SunTrust Bank-Nashville  
P.O. Box 305110  
Nashville, Tennessee 37230-5110

**James D. Hinton, 2004\***  
**Community Investments Committee Chair**  
Vice President  
HCA  
One Park Plaza, 2-4E  
Nashville, Tennessee 37203

**Paul Gaeto, 2006\*\***  
**Performance Excellence Committee Chair**  
President  
Caterpillar Power Ventures Corporation  
2120 West End Avenue  
Nashville, Tennessee 37203

**Anthony F. Holt, 2005\***  
Chief Financial Officer  
Cushion Employer Services Corp.  
665 Mainstream Drive, Suite 200  
Nashville, Tennessee 37228

**Priscilla Partridge de Garcia, 2005\***  
Clinical Psychologist  
AIM Partridge Garcia Group, Inc.  
124 Abbeywood Drive  
Nashville, TN 37215

**Charles (Charlie) L. Howorth, Jr., 2005\*\***  
**Succession Planning Committee Chair**  
Regulatory Vice President  
BellSouth  
333 Commerce Street, Suite 2104  
Nashville, Tennessee 37201-3300

**Statement 10**  
**Board of Trustees**

**Orrin H. Ingram, II**  
**Non-voting Emeritus Trustee**  
President & CEO  
Ingram Industries Inc.  
4400 Harding Road  
Nashville, Tennessee 37205

**Janet L. (Jan) Jones, 2006\***  
**Voting Ex Officio**  
Association of Nonprofit Executives Liaison  
President/CEO  
Alive Hospice, Inc.  
1718 Patterson Street  
Nashville, Tennessee 37203

**Kelvin Jones, 2006\***  
Deputy Director  
Mayor's Office of Economic & Community  
Development  
222 Second Avenue North, Suite 418  
Nashville, TN 37201

**Joe Kelley, 2004\*\***  
Senior Consultant  
Kroll, Inc.  
1900 Church Street, Suite 400  
Nashville, Tennessee 37203

**Carroll Kimball, 2005\*\***  
1213 Vintage Place  
Nashville, Tennessee 37215

**William C. (Bill) Koch, Jr., 2006\***  
**Board Chair**  
Judge  
Tennessee Court of Appeals  
203 Supreme Court Building  
401 7<sup>th</sup> Avenue North  
Nashville, Tennessee 37219-1407

**Sandra Lipman, 2006\*\***  
5906 Hillsboro Road  
Nashville, Tennessee 37215

**Pam Martin, 2004\***  
**Secretary**  
President  
Cushion Employer Services Corp  
665 Mainstream Drive, Suite 200  
Nashville, Tennessee 37228

**Kelli A. Molette, 2006\***  
Kelli A. Turner, DDS, PC  
1506 Church Street, Suite 110  
Nashville, TN 37203

**Beth Mooney, 2004\***  
**Board Chair-elect**  
President Tennessee and North Louisiana  
AmSouth Bank  
315 Deaderick Street  
AmSouth Center, 6<sup>th</sup> Floor  
Nashville, Tennessee 37237

**Michael S. (Mike) Neal, 2006\***  
President & CEO  
Nashville Chamber of Commerce  
211 Commerce St., Suite 100  
Nashville, TN 37201

**Carolynn Reid-Wallace, 2005\***  
**Executive Committee Member at-large**  
President  
Fisk University  
1000 Seventeenth Avenue North  
Nashville, Tennessee 37208-3051

**Mary Rolando**  
**Non-voting Emeritus Trustee**  
Policy Analyst  
206 Jackson Blvd.  
Nashville, Tennessee 37205-3300

**Anne L. Russell**  
**Non-voting Emeritus Trustee**  
Partner  
Stokes Bartholomew Evans & Petree  
424 Church Street, Suite 2800  
Nashville, Tennessee 37219-2386

**Statement 10**  
**Board of Trustees**

**Karen Saul, 2004\***

President/CEO  
The HR Group  
5205 Maryland Way, Suite 300  
Brentwood, Tennessee 37027

**Noel B. Williams, 2004\***

Sr. Vice President & Chief Information Officer  
HCA  
2555 Park Plaza  
Nashville, Tennessee 37203

**Jay D. Sevigny, 2005\***

**Marketing Committee Chair**

President  
Gaylord Opryland Resort & Convention Center  
2800 Opryland Drive  
Nashville, Tennessee 37214

**Brenda Wynn, 2006\*\***

Director of Community Outreach  
Office of Congressman Cooper  
706 Church Street  
Suite 101  
Nashville, TN 37203

**Bob Sircy, Jr., 2004\*\***

**Executive Committee Member at-large**

Vice President & Corporate Controller  
Southwestern/Great American, Inc.  
P.O. Box 305140  
2451 Atrium Way  
Nashville, Tennessee 37230-5140

**J. Michael (Mickey) Sullivan, 2004\***

Regional Vice President  
Gresham, Smith and Partners  
1400 Nashville City Center  
511 Union Street  
Nashville, Tennessee 37219

**Claire W. Tucker, 2006\***

City President  
FirstBank  
200 4<sup>th</sup> Avenue North  
Nashville, TN 37219

**David Williams II, 2006\***

Vice Chancellor for Student Life and  
University Affairs, General Counsel,  
Secretary and Professor of Law  
Vanderbilt University  
305 Kirkland Hall  
Nashville, TN 37240

**United Way of Metropolitan Nashville, Inc.**  
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**Statement 11**  
**Form 990, Part VI, Line 79**

The United Way organization in Hickman County, Tennessee ceased to exist in 2003, and its remaining assets, \$16,991, were transferred to the local county executive for distribution.